

2-59 AM

ପାରମ ସଂଖ୍ୟା-4
[ନିୟମ 12 (10) ଦ୍ରଷ୍ଟବ୍ୟ]
ମନୋନୟନ ପତ୍ର

(Handwritten signature)

04

13 ନୟାଗଡ଼ ଜିଲ୍ଲା, ସମ୍ବଲପୁର, ବାଲିଆପାଲି ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ 13 ନୟାଗଡ଼ ଜିଲ୍ଲା, ~~ବାଲିଆପାଲି~~ ^{ଆଳିକୋଟ - 3} ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀରୁ ନିମ୍ନଲିଖିତ ବ୍ୟକ୍ତିଙ୍କୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ରାମା ଚନ୍ଦ୍ର ବେହେରା

ପିତା/ପତିଙ୍କ ନାମ ଅକ୍ଷୟ ବେହେରା

ତାଙ୍କର ଡାକ ଠିକଣା ପ୍ରା- ବେଲପୁର, ଡା- ସମ୍ବଲପୁର, ଆର. ପଞ୍ଚ, ବାଲିଆପାଲି, ଝରିଆ

13 ନୟାଗଡ଼, ସମ୍ବଲପୁର, ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା କ୍ରମିକ ସଂଖ୍ୟା 235 ଡ୍ଵାର୍ଟ ନଂ 4 ବକସ୍ 2

ମୋର ନାମ ରାମା ଚନ୍ଦ୍ର ବେହେରା ଅଟେ ଏବଂ 13 ନୟାଗଡ଼ ଜିଲ୍ଲା ଜିଲ୍ଲା

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା 256 ଡ୍ଵାର୍ଟ ନଂ 12 ବକସ୍ 2 ରେ ତାହା ଦରଜ କରାହୋଇଅଛି ।

ତାରିଖ 21.01.2022

* ପ୍ରମୋଦ ଚନ୍ଦ୍ର ମିଶ୍ର
ପ୍ରତ୍ନାବଳୀ ସ୍ଵାକ୍ଷର

ମୋର ନାମ ରାମା ଚନ୍ଦ୍ର ଅଟେ ଏବଂ 13 ନୟାଗଡ଼ ଜିଲ୍ଲା ପରିଷଦ, ସମ୍ବଲପୁର

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା 378 ଡ୍ଵାର୍ଟ ନଂ 07 ବକସ୍ 2 ରେ ତାହା ଦରଜ ହୋଇଅଛି ।

ତାରିଖ 21.01.2022

* ସେନା ଆବିଦି
ସମର୍ଥକଙ୍କ ସ୍ଵାକ୍ଷର

ମୁଁ ଉପର ମନୋନୀତ ପ୍ରାର୍ଥୀ ମନୋନୟନ ପତ୍ର ସମ୍ମତ କରାଉଛି ଏବଂ ଏତଦ୍ଵାରା ଘୋଷଣା କରୁଅଛି ଯେ-

- (କ) ମୋର ବୟସ 37 ବର୍ଷ ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।
- * (ଖ) ମୁଁ ରାମା ଚନ୍ଦ୍ର ବେହେରା ବର୍ଷ ଦଳଦ୍ଵାରା ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଛି ।
- (ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ମନୁ ଚନ୍ଦ୍ର
(ii) ଏବଂ (iii)

(ଘ) ମୋର ଏବଂ ମୋର ପିତା/ପତିଙ୍କର ନାମ ଉପରେ
..... ଉଦିଆ ହାତୀ (ଭାଷାର ନାମ) ଠିକ୍ ଭାବରେ ବନାନ କରାଯାଇଛି ।

(ଙ) ମୋର ଜ୍ଞାନ ଓ ବିଶ୍ୱାସ ଅନୁଯାୟୀ ମୁଁ ପ୍ରାର୍ଥା ହେବା ପାଇଁ ଯୋଗ୍ୟ ଏବଂ ଯଦି ମୋତେ 13 ନଭେମ୍ବର 2022
ମହାଲକ୍ଷ୍ମୀ ମନ୍ଦିର ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦର ଆସନ ପୂରଣ ନିମନ୍ତେ ପସନ୍ଦ କରାଯାଏ ତେବେ ମୁଁ
ଅଯୋଗ୍ୟ ନୁହେଁ ।

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ରାମଚନ୍ଦ୍ର ଚନ୍ଦ୍ରା

**ଜାତି/ଜନଜାତିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ ଜାତି/ଅନୁସୂଚିତ ଜନଜାତି/ପଛଆଦର୍ଶ ନାଗରିକ
ଅଟେ ।

ତାରିଖ 21. 01. 2022

Ramachandra Maitya
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

- * ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ ଜାତି ଦିଅନ୍ତୁ ।
- ** ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ ଜାତି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ କାରି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ

ତାରିଖରେ ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

ତାରିଖ

ନିର୍ବାଚନ ଅଧିକାରୀ

ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କର ମନୋନୟନ ପତ୍ର ମଞ୍ଜୁର କରିବା ବା ନାମଞ୍ଜୁର କରିବା ନିଷ୍ପତ୍ତି

ମୁଁ ଓଡ଼ିଶା ଜିଲ୍ଲା ପରିଷଦ ଅଧିନିୟମ, 1991ର ବ୍ୟବସ୍ଥା ଅନୁସାରେ ଏବଂ ତଦନୁଯାୟୀ ପ୍ରଣୀତ ନିୟମାବଳୀ ଅନୁଯାୟୀ ଏହି
ମନୋନୟନ ପତ୍ରଟିକୁ ପରୀକ୍ଷା କରି ଦେଖୁଅଛି ଏବଂ ନିମ୍ନମତେ ନିଷ୍ପତ୍ତି କରୁଅଛି :—

*ମନୋନୟନ ପତ୍ର ଗ୍ରାହ୍ୟ/ଅଗ୍ରାହ୍ୟ

ତାରିଖ

ନିର୍ବାଚନ ଅଧିକାରୀ

भारतीय गैर न्यायिक

भारत
रुपये
5.10
INDIA



TEN
RUPEES
Rs.10

INDIA NON JUDICIAL

**BEFORE THE NOTARY, CHATRAPUR, GANJAM
AFFIDAVIT**

(To be submitted by candidate to the Election Officer / Returning Officer as on
accompaniment to the Nomination Paper)

52AA 583836

*For election to the office of ZILLA PARISHAD MEMBER OF 13 NUMBER ZONE.
IN GANJAM ZILLA PARISHAD, DISTRICT GANJAM, DISTRICT / MEMBER OF
KHALLIKOTE, PS of Ganjam of District / Member ZILLA PARISHAD MEMBER
OF 13 NUMBER ZONE of ZILLA PARISH AD of Ganjam, District.

*(Please strike off the ones not applicable to you).

I, Rama Chandra Baidya, S/o.Ajiba Baidya Resident of KESHPUR, Po :
KHALLIKOTE RS, PS : KHALLIKOTE, DIST: Ganjam, Odisha, ZILLA PARISHAD
MEMBER candidate at the above election, do hereby solemnly affirm and state on
oath as under:-

**1. (A) I have in the past been convicted of criminal offence in the following case(s) and the details
are as under :-

- (i) Case No. NIL
- (ii) Section of the Act and description of the offence for which convicted. :
.....NIL
- (iii) Date of conviction :
- (iv) Court by which convicted :
- (v) Punishment imposed (indicate period of imprisonment awarded and/or
quantum of the fine imposed):.....
- (vi) Details of appeal / revision etc. against conviction :

(Request the above sequence in respect of each separate case of conviction).

Forms Part of Affidavit

Rama Chandra Baidya
21/11/2022
NOTARY Chatrapur Gm

Cont.P.2

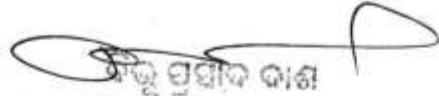
RAMA CHANDRA BAIDYA
NOTARY
GOVT. OF ODISHA
Chatrapur, Ganjam District

WELFARE FUND
Rs. 20/5772
SI. No. 5772
CHATRAPUR BAR ASSOCIATION





ନମ୍ବର... ୭୩୨... ଚା. ୭/୧୧/୨୨... ୧୧
ନାମ.....
ଠିକଣା.....


ଅତିରିକ୍ତ ମୁଦ୍ରାକ ଦାଶ
ଶାନ୍ତ କେଶରୀ, ଉତ୍ତମୁର



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ଓଡ଼ିଶା ओडिशा ODISHA

10AA 581873

- (B) That I have in the past been discharged/acquitted in the following case(s).
- (i) Section of the Act and description of the offence with which charged:
- (ii) The Court which had taken cognizance :
- (iii) Case No.....
- (iv) Details of appeal/application for revision etc., if any filed against above order taking cognizance :

(Repeat the above sequence in respect of each separate case of discharge/acquittal).

- (C) The following case(s) is/are pending against in which cognizance has been taken by the Court. : **J.M.F.C. KHALLIKOTE.**
- (i) Section of the Act and description of the offence for which cognizance taken: **G.R.-1084/21 (U/S.147, 148, 452, 374, 336, 427, 294, 506, 149 IPC/251 (b) (a) Arms Act, (ii) G.R 1066/21, U/S. 147, 148, 307, 506, 149, (iii) G.R.1065/21 U/S.147, 148, 323, 307, 149, IPC R/W 3 & 4 E.S. Act. (iv) 2(c) (c) (c) / 17.**
- (ii) The Court which has taken cognizance :
- (iii) Case No : **G.R.-1084/21, G.R 1066/21, G.R.1065/21, 2(c) (c) (c) / 17.**
- (iv) Details of appeal / application for revision etc., if any, filed against above order taking cognizance : ...**J.M.F.C. KHALLIKOTE.**

(Repeat the above sequence in respect of each separate case of cognizance by Court).

** If information against any of the columns at (A)/(B)/(C) is nil, state 'NIL', against the corresponding column and strike off the sub-columns below.

Cont.P.3

Forms Part of Affidavit
Mehra
21/1/2022
NOTARY (Chatrapur U.S.S.)



ନମ୍ବର... ୨୫୨ ୧୫/୧୨/୨୦୧୮
ତାରିଖ.....
ଠିକଣା.....


ଅଧ୍ୟକ୍ଷକ ଦାମ
ଅଫିସ୍ ଚେଜର, ଗଞ୍ଜାମ

↑



ଓଡ଼ିଶା ओडिशा ODISHA

/ 3 /

10AA 581874

2. That, I/my spouse / my dependants own the following immovable properties.
(A)

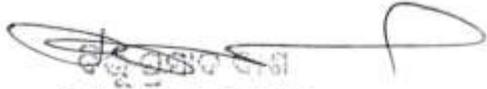
| Agricultural Land(s) | Location | Area | Approx. present Market value according to you |
|--|--------------------------------|---------|---|
| Self name | Mouza-Phasedi, K.No. 166/37 | Ac1.340 | NIL |
| Spouse (Give name) | — | — | NIL |
| Dependant son(s) [Give name(s)] | — | — | NIL |
| Dependant daughter(s) [Give name(s)] | — | — | NIL |
| Dependant (Others) (Give name and relationship) | — | — | NIL |
| In Joint name(s) (Give names) | — | — | NIL |

Form 1 Part of Affidavit

 21/11/2022
 NOTARY Chatrapur Um.1



ନଂ..... ୨୩୩..... ଚା. ୨୮/୧୧/୨୨୭ ୧୭
ନାମ.....
ଠିକଣା.....


ଅଧ୍ୟକ୍ଷକ, ପଞ୍ଜୀକରଣ
ଅଫିସ୍, ଭୁବନେଶ୍ୱର

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ଓଡ଼ିଶା (B) ओडिशा ODISHA

10AA 581875

| Urban Land(s) | Location | Area | Approx. present Market value according to you |
|--|----------|------|---|
| Self name | - | - | Nil |
| Spouse (Give name) | - | - | Nil |
| Dependant son(s) [Give name(s)] | - | - | Nil |
| Dependant daughter(s) [Give name(s)] | - | - | Nil |
| Dependant (others) (Give name and relationship) | - | - | Nil |
| In Joint name(s) (Give names) | - | - | Nil |

Cont.P.4

Forms Part of Affidavit
(Signature)
 24/11/2022
 NOTARY Chatrapur Um.



ଓଡ଼ିଶା (B) ओडिशा ODISHA

10AA 581875

| Urban Land(s) | Location | Area | Approx. present Market value according to you |
|--|----------|------|---|
| Self name | - | - | Nil |
| Spouse (Give name) | - | - | Nil |
| Dependant son(s) [Give name(s)] | - | - | Nil |
| Dependant daughter(s) [Give name(s)] | - | - | Nil |
| Dependant (others) (Give name and relationship) | - | - | Nil |
| In Joint name(s) (Give names) | - | - | Nil |

Cont.P.4

*ornis Part of Affidavit
(Signature)
 24/11/2022
 NOTARY Chatrapur Um.



ନଂସ୍ୱର.....୨୫୦.....ତା. ୧୫/୧୨/୨୦୧୮
ନାମ.....
ଠିକଣା.....


ଅଧ୍ୟକ୍ଷ ପ୍ରଧାନ ଦାଶ
ଅଫିସ୍ ଭେଣ୍ଡର, ଉତ୍ତରପୁର

1



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10AA 581876

3.(A) ओडिशा आडिशा ODISHA

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|--------------------------------------|--|---|---|---|---|---|
| Self Name | Motor vehicle with description such as Car, Jeep, Truck, Bus | Approx. present market value according to you | Gold & gold ornaments, other precious stone (s) (in tolas gram / carat) | Approx. present market value according to you | Silver & silver ornaments (in tolas/grants) | Approx. present market value according to you |
| Self Name | Apache-180 | Rs.40,000/0 | 2 Tola | Rs.80,000/- | 2 Tola | Rs.1,000/- |
| Spouse (Give name) | — | — | 4 Total | Rs.1,60,000 | 2 Tola | Rs.1,000/- |
| Dependant son(s) [Give name(s)] | — | — | nil | nil | nil | nil |
| Dependant daughter(s) [Give name(s)] | — | — | nil | nil | nil | nil |
| Dependant (Others) [Give name(s)] | — | — | nil | nil | nil | nil |
| In Joint name(s) (Give names) | — | — | nil | nil | nil | nil |

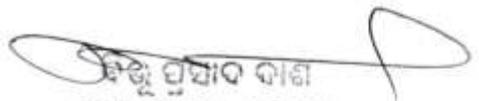
Cont.P.5

Form Part of Affidavit

Chandrag
21/1/2022
NOTARY Chatrapur Um 1



ନମ୍ବର... ୨୩୨... ଡା. ୧୫. ୧୧. ୨୨୦୧
ନାମ.....
ଠିକଣା.....


ଅଧ୍ୟକ୍ଷ ପ୍ରଧାନ ଦାମ
ଅମ୍ଳ ଭେଣ୍ଡର, ଛତ୍ରପୁର



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ଓଡ଼ିଶା, ଓଡ଼ିଶା, ODISHA, 10AA 581877
 3.(B) That, I/my spouse/my dependants have the following Bank balance/deposits.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|--|-------------------------|------------------------------|-----------------------------------|--|----------------------|---|
| Name of the Bank | Amount in Fixed deposit | Name of the Bank/Post Office | Amount in Current/Savings Account | Name of the Company & No. of shares held | Face value of shares | |
| Self name | S.B.I. Khallikote | - | - | - | - | - |
| Spouse (Give name). | - | - | - | - | - | - |
| Dependant son(s) [Give name(s)] | - | - | - | - | - | - |
| Dependant daughter(s) [Give name(s)] | - | - | - | - | - | - |
| Dependant (others) (Give name and relationship) | - | - | - | - | - | - |
| In Joint name(s) (Give names) | - | - | - | - | - | - |

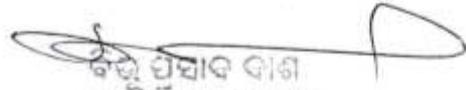
Form Part of Affidavit

(Contd..P/6)

Beena
 21/1/2022



ନଂ.ମୁର. ୨୩୫ ଓ. ୧୫.୧୨.୨୦୧୮
ନାମ.....
ଠିକଣା.....


ବିଭାଗ ପ୍ରଧାନ ଦାଶ
ଆମ ଭେଣ୍ଡର, ଛତ୍ରପୁର



171

ଓଡ଼ିଶା 4 ओडिशा / ODISHA that, I/my spouse / my dependants are liable to pay the following dues to public, financial institutions and Government dues (Give details). 10AA 581878

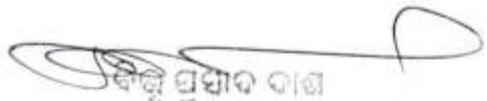
| | Government Dues | | Income Tax Dues | Dues to Financial Institutions. | Any other Dues |
|--------------------------------------|--------------------------------------|--------|-----------------|---------------------------------|----------------|
| | Details of the Nature of Demand/dues | Amount | | | |
| Self name | - | | - | - | - |
| Spouse (Give name) | - | | - | - | - |
| Dependant son(s) [Give name(s)] | - | | - | - | - |
| Dependant daughter(s) [Give name(s)] | - | | - | - | - |
| Dependant (Others) [Give name(s)] | - | | - | - | - |
| In Joint name(s) (Give names) | - | | - | - | - |

(contd..P/8)

Forms Part of Affidavit
R. G. Behara
 21/11/2022
 NOTARY (Chatrapur, Odisha)



ନମ୍ବର ୨୩୭ ତାରିଖ 11.12.2011
ନାମ.....
ଠିକଣା.....


ଅଧ୍ୟକ୍ଷ ପ୍ରଧାନ ଦାଖ
ଅଫିସ୍ କୋଣାର୍କ, ଛତ୍ରପୁର



ଓଡ଼ିଶା - ओडिशा ODISHA

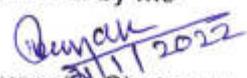
10AA 581879

***Dependant means a person wholly dependant on the income of the candidate.

5. My educational qualification are as under : +3 Arts
 (Give the details of School & University Education) Jaganath Mahavidyalaya
 Rambha, Ganjam.

I, Rama Chandra Baidya, do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief, that no part of it is false and that nothing materials has been concealed there-from.

Verified at Chatrapur, on this 21st day of January-2022.

Identified by me

 Advocate, Chatrapur.
 KODALA

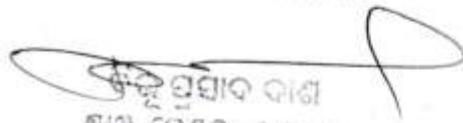
L Rama chandra Baidya.
 Deponent.

The declarant having been identified by
 Advocate Sn. P.K. Pattnayak
 solemnly affirmed before me on this 21
 day of 1 2022 about 2:10 p.m.
 Read over and explained to the deponent
 who seemed to have understood perfectly
 the contents and the theme of the affidavit.
 No.A. 287
 Dt. 21/1/2022

 RAMA CHANDRA BEHERA
 NOTARY
 GOVT. OF INDIA
 Chatrapur, Ganjam, Odisha



ନଂସର ୨୩୬ ଚା. ୧୫/୧୨୨୦୧
ନାମ.....
ଠିକଣା.....


ଅଧ୍ୟକ୍ଷକ ଦାମ
ଆମ ଭେଣ୍ଡର, ଉତ୍ତମପୁର